•									Application or Docket Number				
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003  10764738													
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	ENTITY	OF	OTHER	R THAN ENTITY	
Τ	OTAL CLAIMS	i	35					RATE	FEE	7	RATE	FEE ·	
FOR			NUMBER FILED		NUME	BER EXTRA		BASIC F	EE 385.00	OR	BASIC FEE	770.00	
TC	TAL CHARGE	ABLE CLAIMS	35 minus 20=		. 15			XS 9:		OR	X\$18=		
INC	DEPENDENT C	LAIMS	5 m	inus 3 =	. 2	· · ·		X43=		OR	X86≈		
MULTIPLE DEPENDENT CLAIM PRESENT								÷145:		OR	÷290=		
* If the difference in column 1 is less than zero, enter "0" in column 2						Į	TOTA		OR	TOTAL			
	/U/ 8/UY (Column 1) (Column 2) (Column 3)							SMAL	L ENTITY	OR	OTHER SMALL		
AMENDMENT A	/	CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 37	Minus	- 3	5	=2		XS 9=	50	ÖR	X\$18=		
AME	Independent	1. 7	Minus	4	5	-2		X43=	200	OR	X86=		
Inerfinell With Claims.								+145=		OR	+290=		
During Children Children								TOTA	- I /V /\	OR	TOTAL		
		(Column.1)		(Colum		(Çolumn 3)			0				
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	IER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=		
	Incependent	•	Minus	***		=		X43=		OR	.X86=		
لــُــ	FIRST PRESE	NTATION OF MU	LTIPLE DEF	CLAIM			+145=		OR	+290=			
								TOTA DDIT. FEI		OR ,	TOTAL DDIT. FEE		
(Column 1) (Column 2) (Column 3)													
MEN		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total ·	•	Minus	** ,		=		X\$.9=		OR	X\$18=		
	Indep nd nt		Minus	•••.		E	+	X43=		ı	X86=		
<u>"</u>	FIRST PRESE	IRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							<del> </del>	OR			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT FEE										OR OR	+290= TOTAL		
***	f the "Highest Nur	mber Previously Pai ber Previously Paid	d For IN THIS	S SPACE is	less than	1 3, enter "3."		ODIT. FEE		^	DDIT. FEE		